



Commonwealth of Massachusetts  
Executive Office of Public Safety and Security

2010-2011 MASSACHUSETTS JOHN R. JUSTICE STUDENT LOAN REPAYMENT  
EMPLOYER CERTIFICATION FORM

SECTION A: RELEASE (To be completed by applicant.)		
Last Name	First Name	MI
Address		
City	State	Zip Code
I authorize my employer to provide the employment information requested by the Executive Office of Public Safety and Security, Office of Grants and Research.		
Applicant Signature		Date

SECTION B: EMPLOYMENT (To be completed by employer.)	
<p>The above applicant is applying for a grant through the John R. Justice Grant program which provides loan repayment assistance for state and federal public defenders and state prosecutors (including appellate defenders, ADAs, and criminal appellate AAGs) who agree to remain employed as public defenders and prosecutors in the Commonwealth for at least three years post designation as JRJ beneficiary.</p> <p>Select the box that identifies the applicant's current employer.</p> <p><input type="checkbox"/> Committee for Public Counsel Services <input type="checkbox"/> Federal Defender's Office</p> <p><input type="checkbox"/> Attorney General's Office, Specify Bureau/Division _____</p> <p><input type="checkbox"/> District Attorney's Office, specify county below.</p> <div style="border: 1px dashed black; padding: 5px;"><p><input type="checkbox"/> Berkshire County DA <input type="checkbox"/> Bristol County DA <input type="checkbox"/> Cape &amp; Islands DA <input type="checkbox"/> Essex County DA</p><p><input type="checkbox"/> Hampden County DA <input type="checkbox"/> Middlesex County DA <input type="checkbox"/> Norfolk County DA <input type="checkbox"/> Northwestern DA</p><p><input type="checkbox"/> Plymouth County DA <input type="checkbox"/> Suffolk County DA <input type="checkbox"/> Worcester County DA</p></div>	

SECTION C: EMPLOYMENT (To be completed by employer.)	
Applicant's Job Title: _____ Date of Hire by This Employer: _____	
1.	<p>a. Yes / No Applicant has been employed as a prosecutor or defender (including criminal appellate attorneys) at least 30 hrs./wk. by this employer for <i>at least</i> 36 months preceding this application.</p> <p>b. Yes / No Applicant has been employed at least 30 hrs./wk. by this employer for <i>less than</i> 36 months, however employment with this employer combined with prior employment as a prosecutor or defender with a Massachusetts District Attorney, the Massachusetts Attorney General, CPCS, or Federal Defender equals <i>at least</i> 36 months.</p>

**SECTION C: Cont'd****EMPLOYMENT (To be completed by employer.)**

2. a. Yes / No Applicant's salary from the Commonwealth does not exceed \$70,000 based on 1 FTE.

Applicant's Actual Annual Salary \$

Applicant's Annual Salary based on 1 FTE: \$

**SECTION D:****EMPLOYMENT (To be completed by employer.)**

**Acknowledgments** — As the employer I agree to receive and administer the JRJ funds to the applicant's lender(s), complete and submit required programmatic and financial reports, and comply with additional requirements outlined by the Executive Office of Public Safety & Security, Office of Grants and Research. Furthermore, in the event a JRJ beneficiary voluntarily leaves his/her position as an eligible beneficiary, or in the event he/she is involuntarily separated for misconduct or unacceptable performance before completing the agreed upon period of service, I agree to notify in a timely manner the Executive Office of Public Safety and Security Office of Grants and Research.

**Eligible Beneficiaries**

The purpose of this program is to encourage qualified individuals to enter and continue employment as prosecutors and public defenders. For purposes of this program the following persons shall be considered eligible:

**Prosecutor**—full-time employee (at least 30 hours per week) of a state or unit of local government (including tribal government) who is continually licensed to practice law and prosecutes criminal or juvenile delinquency cases at the state or unit of local government level (including supervision, education, or training of other persons prosecuting such cases). 42 U.S.C. §3797cc-21(b)(1). Prosecutors who are employees of the federal government are not eligible.

**Public Defender**—an attorney who is continually licensed to practice law and is a full-time employee of a state or unit of local government (including tribal government) who provides legal representation to indigent persons in criminal or juvenile delinquency cases including supervision, education, or training of other persons providing such representation; is a full-time employee of a nonprofit organization operating under a contract with a state or unit of local government who devotes substantially all of the employee's full-time employment to providing legal representation to indigent persons in criminal or juvenile delinquency cases including supervision, education, or training of other persons providing such representation; or employed as a full-time federal defender attorney in a defender organization pursuant to Subsection )(g) of section 3006A of Title 18, United States Code, that provides legal representation to indigent persons in criminal or juvenile delinquency cases. 42 U.S.C. §3797cc-21(b)(2).

**NOTE:** Attorneys in private practice and not a full-time employee of a non-profit organization, even if individually or part of a firm that is under contract with a state or court-appointed to provide public defense services, do not qualify as "public defenders" and therefore are not considered to be eligible as beneficiaries under this solicitation

1. Yes / No Applicant is employed as an eligible Prosecutor for JRJ Funds based on the above definitions
2. Yes / No Applicant is employed as an eligible Public Defender for JRJ Funds based on the above definitions

I certify the information provided in this form is accurate to the best of my knowledge and will provide supporting documentation if requested by the Executive Office of Public Safety and Security, Office of Grants and Research.

\_\_\_\_\_  
Signature of Authorized Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Area Code/Telephone Number

\_\_\_\_\_  
E-mail Address